



Florida Neighborhood Revitalization Program

DR-26RP
R. 04/01

(If you are applying for an enterprise zone - building materials or business equipment refund, please obtain an EZ-M or EZ-E from your local enterprise zone coordinator.)

1. Please indicate the type of refund you are applying for by clearly marking the appropriate boxes:

- | | |
|---|--|
| <input type="checkbox"/> Enterprise (Empowerment) Zone
(This application must be verified and signed by your local enterprise zone coordinator.) | <input type="checkbox"/> Urban High Crime Area |
| <input type="checkbox"/> Single Family Home | <input type="checkbox"/> Housing Project |
| <input type="checkbox"/> Housing Project | <input type="checkbox"/> Mixed-Use Project |
| <input type="checkbox"/> Mixed-Use Project | |
|
 | |
| <input type="checkbox"/> Front Porch Florida Community
(This application must be verified and signed by your Front Porch Florida council chair.) | <input type="checkbox"/> Brownfield Area |
| <input type="checkbox"/> Single Family Home | <input type="checkbox"/> Housing Project |
| <input type="checkbox"/> Housing Project | <input type="checkbox"/> Mixed-Use Project |
| <input type="checkbox"/> Mixed-Use Project | |
| | <input type="checkbox"/> Urban Infill and Redevelopment Area |
| | <input type="checkbox"/> Housing Project |
| | <input type="checkbox"/> Mixed-Use Project |

2. Zone number, Area number, or Name: _____

(For enterprise or empowerment zones ONLY - please have the local enterprise zone coordinator complete #3 of this application verifying the construction is inside the boundaries of an enterprise or empowerment zone)

3. Florida EZ Number: EZ- _____

4. Owner's name: _____

5. Owner's social security or FEI number: _____

6. Mailing address: _____

City, State, ZIP: _____

7. Property address: _____

City, State, ZIP: _____

8. Assessment roll parcel number: _____

9. Building permit number: _____ Inspector's name: _____

Phone number: _____ Fax number: _____

10. Date of certificate stating improvements are substantially completed: ____/____/____

I hereby affirm under penalty of perjury that all of the above statements are true and correct to the best of my knowledge and belief.

Sworn to and subscribed before me this _____ day of _____, _____.

(Signature of owner)

(Date)

(Signature of enterprise zone coordinator)

(Date)

Please attach the following documents and this application to a completed Form DR-26 or DR-26S. If these documents are not attached with this application, your application will be considered incomplete and sent back to you.

1. Florida Department of Revenue *Application for Refund* (Form DR-26 or Form DR-26S).
2. A copy of the building permit.
3. Certificate from building inspector that improvements are substantially completed.

(If a general contractor was used)

4. Attach a sworn statement, under penalty of perjury, from the Florida licensed general contractor who constructed the home, housing project, or mixed-use project which lists the building materials used in constructing the home and the actual cost of those materials, the labor costs associated with construction, and the amount of sales tax paid on materials and labor.

(If a general contractor was not used)

5. The owner must provide the information set forth in #4 in a sworn statement, under penalty of perjury. **Copies of invoices evidencing payment of sales tax must also be attached.**

(For single-family homes – building materials and labor)

6. A sworn statement, under penalty of perjury, from the owner certifying that the owner occupies the home for residential purposes.
7. An appraisal evidencing that the appraised value of the home is no more than \$160,000. Acceptable appraisals include the following:
 - (a) An assessment from the property appraiser.
 - (b) An appraisal from an independent, licensed Florida appraiser.

(For housing projects or mixed-use projects – building materials only)

8. Provide verification that the housing or mixed-use project was developed from the conversion of an existing manufacturing or industrial building. Acceptable certification includes:
 - (a) Prior year property record card from local property appraiser.
9. A sworn statement, under penalty of perjury, from the owner of the project showing that at least 20 percent of the square footage of the housing or mixed-use project has been set aside for low-income and moderate-income housing.
10. **For a mixed-use project** - provide verification by means of description that the building has been converted into mixed-use units that include artists' studios, art and entertainment services, or other compatible uses.

The completed application and DR-26 (or DR-26S) must be submitted to the Department of Revenue within six (6) months after the date the single-family home, housing project or mixed-use project is deemed to be substantially completed by the local building inspector.

Please submit the DR-26 (or DR-26S), DR-26RP, all documentation, and attachments to the following address:

FLORIDA DEPARTMENT OF REVENUE
REFUNDS SUBPROCESS
PO BOX 6490
TALLAHASSEE FL 32314-6490